



September 22, 2014

To: Business Psychology Associates SUD Provider Network

From: Business Psychology Associates

RE: SUD Clinical Supervision - Using the How to Manual

When: October 29, 2014

Where: Region 5
Department of Health and Welfare
601 Pole Line Rd
Twin Falls, ID 83301

Time: 9:00 am – 5:00 pm

Business Psychology Associates will be offering a one (1) day training on SUD Clinical Supervision utilizing the NFATTC model and “How to Manual”. This training is for individuals who are currently working with agencies contracted under the SUD Provider Network.

This training is for individuals who meet the Clinical Supervision standards set forth in IDAPA 16.07.20 to provide clinical supervision to QSUDP’s and QSUDP Trainees. Please review the Clinical Supervisor Checklist to see if you meet criteria. Documentation must have already been submitted to John Kirsch at IDHW and approved. You may find the standards using the link provided below and go to section 216-218:

<http://adminrules.idaho.gov/rules/current/16/0720.pdf>

Please Note: Attendance of the training does not qualify you as a Clinical Supervisor.

Providers wishing to attend this training must submit their registration forms by **October 21, 2014**

Attached is the registration form. Completed registration forms should be faxed to (208) 344-7430 to the attention of Michelle Barker or e-mailed to michelle.barker@bpahealth.com.



SUD Clinical Supervision – Using the How to Manual
Registration Form
October 29, 2014

Location Region 5
Department of Health and Welfare
601 Pole Line Rd
Twin Falls, ID 83301

Time: 9:00 am – 5:00 pm

Please fill out a registration form for each participant

Name: _____

Organization: _____

Mailing Address: _____

Phone Number: _____

Email: _____

_____ I have previously attended a SUD Clinical Supervision Training

_____ I have not attended a SUD Clinical Supervision Training

Registration is limited to 20 participants with preference being given to individuals who have never participated in SUD Clinical Supervision Training. Those attending must be providing SUD Treatment Services and meet the criteria to be a Clinical Supervisor in the BPA Provider Network.

Please complete the registration forms by 5:00 pm October 21, 2014 and fax or email to:

Provider Network Management

Fax: 208-344-7430 Attention Michelle Barker

Email: michelle.barker@bpahealth.com

Confirmation of attendance will be confirmed by BPA via email. Please plan to bring the confirmation information to the training.

PR-89-09/22/2014